

# STATE OF HAWAII DEPARTMENT OF HEALTH

P. O. Box 3378 Honolulu, HI 96801-3378 doh.testimony@doh.hawaii.gov

# Testimony in SUPPORT of HB578, HD2 RELATING TO HEALTH

## SENATOR SYLVIA LUKE, CHAIR, HOUSE COMMITTEE ON FINANCE

Hearing Date: February 27, 2015 Room Number: 308

- 1 Fiscal Implications: None for DOH.
- 2 Department Testimony: The Department of Health (DOH) supports House Bill 0578 HD2
- 3 (HB0578 HD2). The purpose of HB0578 HD2 is to connect adolescents back to their healthcare
- 4 provider by expanding the physical examination requirement. Currently, physical examinations
- 5 are only conducted upon entry into the school system in kindergarten. HB0578 HD2 expands the
- 6 physical examination requirement to also include entry into seventh grade. Grade seven was
- 7 chosen because it coincides with current immunization requirements. This bill follows the lead
- 8 of other states and Hawaii private schools who have multiple physical examination requirements
- 9 throughout a child's educational journey.
- The Department offers comments in the interest of the health of our students because
- increasing the physical exam requirement for school attendance provides a broader, systematic
- approach to connecting children back to their primary care physicians. The policy also promotes
- utilization of the covered preventive health benefits established by the Affordable Care Act
- 14 (ACA). Due to the ACA, annual well child examinations are a required covered benefit in all
- 15 health plans.
- The proposed increase in the physical exam requirements is congruent with the policy
- 17 priority set forth by the Obesity Prevention Task Force. The Task Force, co-chaired by our late
- Director Loretta Fuddy developed and recommended legislation pursuant to Act 269 (SB2778)
- 19 CD1), Session Laws of Hawaii 2012. The policy to expand physical examination requirements

for public school students was proposed to reinforce a culture of wellness and preventive health care.

Currently, the state expends \$470 million a year on obesity-related medical costs, and \$770 million on diabetes-related medical costs. Today in Hawaii, more than one in two adults (BRFSS 2012; 56%) and over one in four high school (YRBS 2013; 28.2%) are overweight or obese. The rate adults with diabetes in Hawaii is 8.4% and an additional 12.9% have been diagnosed with pre-diabetes (2013 BRFSS). By 2030 half of adults in Hawaii are projected to be obese without effective interventions (2013, Trust for America's Health). According to the Trust for America's Health, "Keeping people healthier is one of the most effective ways to reduce healthcare costs," (July 2008).

The adoption of this measure entails family and community engagement. The additional physical exam requirements offer physicians and healthcare providers together with parents and adolescents the opportunity to address developmentally relevant physical and mental health issues. Regular visits are preventive, so health needs can be assessed and addressed early. The requirements of HB0578 HD2 embraces the whole child to assure they are healthy and ready to learn.

Thank you for the opportunity to provide testimony.

Testimony Presented Before the
House Committee on Finance
Friday, February 27, 2015 at 11:00am
By
Robert Bley-Vroman, Chancellor
And
Jerris R. Hedges, MD, Dean
And
May Okihiro, MD, Professor of Pediatrics
John A. Burns School of Medicine
University of Hawai'i at Mānoa

#### HB 578 HD2 – RELATING TO EDUCATION

Chair Luke, Vice Chair Nishimoto, and Members of the Committee:

Thank you for an opportunity to testify *in support of* HB 578 HD2, which requires children to undergo a physical examination prior to attending seventh grade beginning with the 2016-2017 school year.

Almost three-fourth (3/4) of all adolescent mortality is a result of motor vehicle accidents, homicide, suicide, and unintentional injuries (CDC, 2010). Unhealthy lifestyles and risk factors for chronic disease, such as smoking, poor nutrition, and mental health problems, begin in childhood and adolescence and track into adulthood. Youth are also at risk for suicide from underlying depression. In 2011, among youth in Hawai'i:

- 29.5% reported that they felt sad or hopeless almost every day for two or more weeks in a row
- 15% said they would attempt suicide in the past 12 months
- 1 in 4 are overweight or obese, and in some communities over 50% of adolescents are overweight or obese
- 37% reported that they never had sexual intercourse

Except for routine immunizations and mandated sports physicals, many youth do not receive health screening for depression or chronic health conditions such as obesity. As academic success of Hawaii's youth is intimately linked to their health, annual health screening of school age youth has great promise for strengthening the fabric of society. Research shows that poor health such as mental health disorders, uncontrolled asthma, poor nutrition and sleep disorders are closely linked to poor academic outcomes. On the other hand, research also shows that academic success is a primary predictor of adult health outcomes. For example, in Hawai'i, the prevalence of diabetes among those who did not graduate from high school is 10.6%, twice that of those who graduated from college (4.8%).

Primary care providers are in a unique position to screen for chronic disease risk factors and behaviors and provide guidance, brief counseling and care coordination for the adolescent and his/her parents. In the ideal world, youth would see their physicians regularly throughout childhood for preventive health care. However, in today's busy world this often does not happen; physicians often only see children and adolescents when they are sick or injured.

Thus mandating annual health screening by a primary care provider as they enter their adolescent years offers great promise for advancing the health of our keiki, ensuring that they are healthy and ready to learn.

Thank you for this opportunity to testify.



To: The Honorable Sylvia J. Luke, Chair, Committee on Finance

The Honorable Scott Y. Nishimoto, Vice Chair, Committee on Finance

Members, House Committee on Finance

From: Jessica Yamauchi, Executive Director

Date: February 25, 2015

Hrg: House Committee on Finance; Friday, February 27, 2015 at 11:00 a.m. in Rm 308

Re: Support for HB 578, HD2, Relating to Education

Thank you for the opportunity to offer testimony in **support of** House Bill 578, HD2, which requires children to undergo a physical examination prior to attending seventh grade, and provides for provisional attendance with written documentation if a child is in progress of undergoing a physical examination and sets a deadline for submittal of documentation of completion of such examination.

The Hawaii Public Health Institute (HIPHI) supports and promotes policy efforts to create a healthy Hawaii. HIPHI weaves silos into working relationships as an effective network, ensuring that we come together across sectors to advance collaboration and innovation in public health and work towards making Hawaii the healthiest place on earth.

Currently, kindergarten is the only time when students are required to have a health assessment in order to attend public school. In contrast, students attending private schools are assessed every one to two years. While physical examinations are conducted for sports activities, those types of examinations are limited and not as comprehensive as a health assessment. As academic success of Hawaii's youth is intimately linked to their health, this additional health screening has great promise for improving the health our youth. Research shows that poor health such as mental health disorders, uncontrolled asthma, poor nutrition and sleep disorders are closely linked to poor academic outcomes. Further, obesity is becoming more of an issue each year, with as many as one in four children in Hawaii already being considered overweight or obese, contributing to medical expenditures that totaled more than \$470 million in 2009 alone.

The routine physical assessment of students is important for monitoring the health and wellbeing of our keiki. Conducting an additional physical assessment at the benchmark of entering seventh grade greatly aides in addressing and preventing health-related issues such as childhood obesity, smoking, and dealing with stress, as well as maintaining a current schedule of vaccinations. Vision and hearing are also screened, which can interfere with learning. The physical exam helps link the child back to their medical home, which has shown an improvement in health for a variety of outcomes. Primary care providers are in a unique position to screen for chronic disease risk factors and behaviors and provide guidance, brief counseling and care coordination for the adolescent and his/her parents. Under the Affordable Care Act, these physical exams would be done free of charge for all of Hawaii's keiki.



Hawaii Public Health Institute supports HB 578, HD2 and asks the committee to pass this measure. Thank you for the opportunity to testify.

Respectfully,

Jessica Yamauchi, MA

**Executive Director** 



February 27, 2015

TO: House Committee on Finance

Representative Sylvia Luke, Chair

Representative Scott Nishimoto, Vice Chair

FROM: Dr. Vija Sehgal, Pediatrician and Chief Quality Office / Associate Medical Officer

Waianae Coast Comprehensive Health Center / 697-3457 or wcchc@wcchc.com

RE: HB578: Relating to Education

Thank you for the opportunity to submit testimony in support of HB578 to mandate a physical examination for entry into seventh grade in the public school system.

The Waianae Coast Comprehensive Health Center (WCCHC) is a Federally Qualified Health Center serving over 33,000 patients in Leeward Oahu. Of those patients, 13,385 are school age children served primarily in our pediatric clinic on the main campus in Waianae. To better meet the dynamic physical, emotional and social needs of our adolescent patients, an adolescent clinic and two school based health centers are under development.

It is during adolescence that youth can develop numerous health issues, the majority of which are preventable. High-risk health behaviors that contribute to the most common causes of morbidity and mortality among young adults are often established in childhood and adolescence. These include smoking, drinking/drug use, high-risk sexual practices, unhealthy nutrition, lack of sleep and physical inactivity. These behaviors are also intimately linked to academic achievement.

Establishing a health care home, where primary care practitioners, pediatricians, family physicians and nurse practitioners have a long-standing relationship with families, is a factor in preventing these problem behaviors. The adolescent well child visit creates a safe environment where adolescents can feel comfortable talking to their doctor about their health and wellness. They should receive appropriate screening and guidance for alcohol and drug use, depression and suicide, sexuality and reproductive health issues as well as obesity, diabetes and cardiovascular disease. However, this cannot be done in a 10-minute sick visit for a cold. The Waianae Coast Comprehensive Health Center supports the American Academy of Pediatrics standard that regular "Well Child" physical exams should occur throughout childhood. HB578 combines the physical assessment requirement into the same timeframe required for immunization updates, thus lessening the burden for parents.

There are many reasons that adolescents are *only* seen by their primary care provider for the occasional sick visit. Prior to the Affordable Care Act, some health insurance policies did not cover preventive healthcare visits for children. The Hawaii Department of Education has mandated documentation of a comprehensive physical exam *only* at kindergarten entry. Thus, busy parents have not prioritized preventive healthcare visits. It should not be surprising then that many public school students have not had a comprehensive physical exam for years. It should also not be a surprise that depression, obesity, pre-diabetes and substance abuse too often go undiagnosed until a crisis occurs.

In a recent study of children seeking care at our Waianae Pediatric Clinic, 52% of the 11-14 year olds are overweight or obese and 55% of the 15-19 year olds are overweight or obese. We know that obesity is the primary risk factor for type 2 diabetes and cardiovascular disease. And, studies have shown that 80% of children who are overweight at 10-15 years become obese adults. This study indicates increasing rates of adult obesity on the Waianae Coast when compared to 2012 data (from the Hawaii Primary Care Needs Assessment Data Book, DOH.). This data on obesity alone is cause for alarm and a motivating factor for the health center to support mandatory physicals for adolescents.

Reconnecting our adolescents with their primary care provider embraces the whole child to assure they are healthy and ready to learn. While we know HB578 is just a start, we think it strongly supports our patient centered medical home model, optimal adolescent health and student achievement. **Most importantly, the bill strengthens the relationship between our health and educational systems, as well as adolescents and parents in Hawaii.** 

Hawaii Chapter

February 26, 2015

AAP - Hawaii Chapter

5414 Kirkwood Place Honolulu, HI 96821

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Written Testimony from Michael Hamilton, President

#### **RE: HB 578 Relating to Education**

Thank you for this opportunity to testify *in strong support* of HB 578 which will establish a policy mandating documentation of a physical examination, by a licensed physician or advanced practice registered nurse, at entry to the 7<sup>th</sup> grade.

The Hawaii Chapter of the American Academy of Pediatrics is a voluntary organization of over 200 pediatricians in Hawaii. Our mission is to attain optimal physical, mental and social health and well being for infants, children, adolescents and young adults in Hawaii.

Adolescence is a period of tremendous physical, emotional and social change. During this period youth can develop numerous health issues, the majority of which are preventable. High-risk health behaviors that contribute to the most common causes of morbidity and mortality among young adults are often established in childhood and adolescence. These include smoking, drinking/drug use, high-risk sexual practices, unhealthy nutrition, lack of sleep and physical inactivity. These behaviors are also intimately linked to academic failure and achievement.

Primary care practitioners, pediatricians, family physicians and nurse practitioners who have a long-standing relationship with families, are ideally suited for preventing problem behaviors. The adolescent well child visit creates a safe environment where adolescents can feel comfortable talking to their doctor about their health and wellness. The American Academy of Pediatrics has advocated that child should have regular "Well Child" physical exams throughout childhood. In adolescence, they should receive appropriate screening and guidance for alcohol and drug use, depression and suicide, sexuality and reproductive health issues as well as obesity, diabetes and cardiovascular disease. However, this cannot be done in a 10-minute sick visit for a cold.

Too many adolescents are now *only* seen by their primary care provider for the occasional sick visit. The reasons are many. Prior to the Affordable Care Act, some health insurance policies did not cover preventive healthcare visits for children. The Hawaii Department of Education has mandated documentation of a comprehensive physical exam *only* at kindergarten entry. In turn, many busy, over-taxed parents have not prioritized preventive healthcare visits. It should not be surprising then that many public school students have not had a comprehensive physical exam for years. It should also not be a surprise that depression, obesity, pre-diabetes, substance abuse too often go undiagnosed until a crisis occurs.

HB 578 will ensure that all youth attending public school in Hawaii have a well child preventive health care visit at 7<sup>th</sup> grade entry. While we know this is just the start, we think this bill strongly supports the medical home, optimal adolescent health and student achievement. In addition, the bill enhances the working relationship between adolescents, their parents, and the health and educational systems in Hawaii.

Sincerely,

R. Michael Hamilton, MD, FAAP

President



An Independent Licensee of the Blue Cross and Blue Shield Association

February 27, 2015

The Honorable Sylvia Luke, Chair
The Honorable Scott Nishimoto, Vice Chair
House Committee on Finance

Re: HB 578 HD2 - Relating to Education

Dear Chair Luke, Vice Chair Nishimoto and Members of the Committee:

The Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on HB 578 HD2, which establishes a program in the Department of Education requiring any child entering seventh grade to provide appropriate written documentation from a licensed physician or advanced practice registered nurse confirming they have received, or are in the process of receiving, a physical examination performed within twelve months of the date of attendance. HMSA supports the intent of the Bill which reinforces the preventive health mandate under the Affordable Care Act (ACA) which assures medical examination coverage for children up to age 21.

Recognizing the sagacity of the old adage, "an ounce of prevention is worth a pound of cure," a critical element of the ACA is a mandate for preventive care for infants and children, as well as for adults. Pursuant to rules promulgated to implement the ACA, children under the age of 21 are covered not only for their annual physical examination and immunizations; but also for vision and hearing screening; oral health risk assessments; developmental assessments to identify any developmental problems; screenings for hemoglobin level, lead, tuberculin, and other test; and screenings to detect, prevent, and treat problems such as obesity and depression.

HMSA believes that preventive health is the cornerstone of a more efficient and effective health care system. We applied the intent of HB 578 HD2, which reinforces the goal of the ACA's focus on preventive health generally, and on well-child visits, specifically.

Thank you for the opportunity to offer this testimony.

Sincerely,

Jennifer Diesman Vice President

**Government Relations** 



**House Committee on Finance** 

The Hon. Sylvia Luke, Chair The Hon. Scott Y. Nishimoto, Vice Chair

### **Testimony on House Bill 578 HD2**

Relating to Education
Submitted by Nani Medeiros, Public Affairs and Policy Director
February 27, 2015, 11:00 am, Room 308

The Hawaii Primary Care Association (HPCA), which represents the federally qualified health centers/community health centers in Hawaii, supports the intent of House Bill 578 HD1, requiring children undergo a physical examination prior to beginning seventh grade.

In Hawaii, public education is student centered and grounded in a commitment to equity. Part of that equity depends squarely on ensuring all children having the opportunity to pursue, and excel in, their education. The number one cause most often provided by parents of children experiencing chronic absenteeism from our public schools is healthcare. As a community, we must do more to ensure our students have access to health care, and utilize that access through wellness checkups and preventive visits so they can reduce their incidents of chronic absenteeism by identifying and addressing health issues early-on. Asthma, vision, hearing, depression, and many other health issues can be identified through screenings and physical examinations.

Thank you for your consideration and the opportunity to testify.

TO: HOUSE COMMITTEE ON FINANCE

Rep. Sylvia Luke, Chair

Rep. Scott Y. Nishimoto, Vice Chair

FROM: Cristeta Ancog, M.D., FAAP, Kaiser Permanente

RE: in strong support of HB 578: Relating to Education

Thank you for an opportunity to testify *in strong support* of HB 578 which will establish a policy mandating documentation of a physical examination, by a licensed physician or advanced practice registered nurse, at entry to the 7<sup>th</sup> grade.

I am a board certified pediatrician, who practiced at the Kaiser Nanaikeola Clinic on the Waianae Coast for the past 25 years, until I retired last summer. I am also testifying on behalf of Kaiser Permanente.

Currently, children are only required to receive a comprehensive physical exam prior to kindergarten entry, or when the child first enters school. Although the American Academy of Pediatrics recommends yearly well-child exams, many children visit their doctors only when they are very sick. Many *never* come in to see their doctors.

From the ages of 11-15, adolescents experience significant changes physically, emotionally and socially. 7 <sup>th</sup> grade Physical exams are an opportunity to assess and address adolescent issues early, including nutrition, physical fitness, mental and sexual health. This is an ideal time to update adolescent immunizations. Comprehensive physical exams involve much more than is covered in a visit for an acute illness or even for sports clearance. In addition to prevention counseling on drinking/drug use, sexual activity, smoking and other high risk behaviors, we also identify and treat issues relating to obesity, diabetes and cardiovascular health. Physical exams reconnect children and parents to their healthcare providers and medical home, in order to provide continuity of care

Since the Affordable Care Act covers physical exams, parents will not incur additional cost for this visit. This bill also gives parents 1 year prior to 7<sup>th</sup> grade to get the physical done, and even a 3 month "grace period" after that. There don't seem to be any barriers to getting this exam.

HB 578 will ensure that all youth attending public school in Hawaii have a well child preventive health care visit at 7<sup>th</sup> grade entry. While we know this is just the start, we think this bill strongly supports the medical home and optimal adolescent health. In addition, the bill enhances the working relationship between adolescents, their parents, and the health and educational systems in Hawaii. Most importantly, we all know that healthy children have better school attendance which leads to improved school performance.

I strongly urge you to pass this bill.



## STATE OF HAWAII DEPARTMENT OF EDUCATION P.O. BOY 2360

P.O. BOX 2360 HONOLULU, HAWAI`I 96804



Date: 02/27/2015 Time: 11:00 AM Location: 308

Committee: House Finance

**Department:** Education

**Person Testifying:** Kathryn S. Matayoshi, Superintendent of Education

Title of Bill: HB 0578, HD2 RELATING TO EDUCATION.

**Purpose of Bill:** Beginning with the 2016-2017 school year, requires a child to provide

written documentation of a physical examination performed within the 12 months prior to attending seventh grade. Provides for provisional attendance if an exam is scheduled. Makes an appropriation. (HB578)

HD2)

#### **Department's Position:**

The Department of Education (Department) supports HB 578 HD2 which proposes that a child undergoes a physical examination prior to attending seventh grade beginning with the 2016-2017 school year. The bill's intent is to help ensure students are healthy and ready to learn. Further, the proposal seeks to allow families to coordinate the physical exam with the adolescent series of vaccinations.

We respectfully ask for your favorable support of an appropriation since this measure places more recordkeeping and accountability responsibilities on the schools and will increase their workload. As such, this will result in a significant workload increase for schools with limited office staffing, combo schools that serve a broader population in terms of grades, and schools with a high student enrollment. This will stretch already limited resources, as schools will need to:

- Inform parents/legal guardians about the new 7th grade requirement in advance of enrollment (e.g., written notice);
- Ensure the school health aide can review all new student health records (Form 14) for complete immunization information and confirm proof of physical exam in a timely manner;
- Notify parents/legal guardians in writing about any compliance problems;
- Follow-up on students with pending physical exams; and
- Maintain a database of students who have met and not met the requirements.

Also, work related to this measure would not end upon enrollment. For all schools, the amount of additional work required would necessitate, at minimum, additional half-time clerical support

to aid with the recordkeeping and accountability embedded in this measure. This would allow the health aide to attend to the general health/first aid needs of students throughout the school day.

The Department has estimated funding in the amount of \$801,625 for fifty-five half-time equivalent (27.5 FTE) Office Assistant positions to carry out the purposes of this measure. We are open to discussing and working on possible alternative approaches to address the workload increase while remaining mindful of the outlined impact this proposal will have upon schools and their staff.

Respectfully, the Department would like to ensure that HB 578 HD2 would not replace or adversely impact priorities indicated in our Executive Budget.

Further, the Department suggests that the language in the new subsection (a) (p.1, line 11) parallel the existing language in (b) by referring to "...or **other** authorized representative of the department of health." (p.2, line 8)

Thank you for the opportunity to provide testimony on this measure.